

Maryland Department of Human Services Office of Licensing and Monitoring 311 W. Saratoga Street Baltimore, Maryland 21201 Office: 410.767.7871 Fax: 410.333.8408

## RESIDENTIAL CHILD CARE PROGRAMS REPORT

RESIDENTIAL CHILD CARE PROGRAMS REPO	RT						
Provider Organization: Southern MD Youth Ho	omes, Inc.						
Licensing Agency: DHS	•	Contract	ing Agency	y(s):	DHS		
<b>Program Administrator:</b> Kathleen Fitzsimmons	•	Certification #			Exp. Date:	12/31/19	
<b>Type of Inspection:</b> Periodic							
Site Name	Gender	Age Range	License Capacity	DHR Contract Limit	License#/ Exp. date	Date of site Inspection	
Sodus #1	Male	14-18	8	8	#00570 8/6/18	1/12/18	
Sodus #2	Female	14-18	7	7	#00569 8/6/18	N/A	
<u>In</u>	spection Sur	<u>nmary</u>					
Number of Records Reviewed: Youth 0 Staff  Number of Interviews: Youth 3 Staff  Physical Plant Inspection: Approved  Current COMAR Violation: Yes x No If Yes, list Cited Violation(s) below:	-						
Violation(s)	Findings						
14.31.06.10B(4)	Deficiency with meals size and frequency.						
14.31.06.07G(1) 14.31.06.07E(5)	Bathroom had damaged shower and tub faucet.  Carpet appeared unclean and stained						
14.31.06.07E	Bathroom ceiling had a large stain						
14.31.06.07G	Bathroom was not clean						
14.31.06.07C	Water leaking from ceiling in bedroom						
14.31.06.07A	Water pressure in resident's bathroom is low.  Residents not involved in development of ISP plan or meeting.						
14.31.06.17A(2-3)	Residents	not involve	d in developn	nent of ISP pla	an or meeting.		
Corrective Action Plan: Yes <u>x</u> No <u></u> Any Violations During Mid or Re-Licensure Period If Yes See Report(s) Date(s):	ods:			<b>AP:</b> 1/12/			
Complaint Outcome: Founded							
Current Status of License: Continued							
Licensing Coordinator: Odetta Bulluck Date:	2/1/18	Email	: Odetta.	squire-bullu	ıck@marylan	d.gov	
Program Manager: Andre Thomas Date:	2/1/18	Email	: Andre.t	homas@ma	arvland.gov		

